



Office of the Administrative Director — Financial Services Division — Repro-Graphics Center

THE JUDICIARY • STATE OF HAWAII • 1111 ALAKEA, 1ST FLOOR • HONOLULU, HAWAII 96813-2807

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WRITTEN PRICE QUOTE DUE 5-7-07

CONTRACTOR JOB SPECIFICATIONS

1. JRC Job Number 1C-V-077-A
2. Form Title/Number BAIL/BOND RELEASE FORMS
3. Quantity Required 1,000 SETS
4. Date Required RUSH
5. Finish Size Flat 8 1/2X 11" Folded _____
Other _____
6. Paper Specs. 5-PART CARBONLESS SNAP-OUT FORM
1ST SHEET WHITE BOND, CB, .003", 2ND SHEET WHITE BOND,
CFB, .003", 3RD SHEET, YELLOW BOND, CFB .003", 4TH SHEET,
PINK BOND CFB, .003", 5TH SHEET, BLUE BOND, CF, .003"
BLACK TRANSFER IMAGE
7. Numbering Specs. Location on Form UPPER RIGHT
Numbered From BRF No. 11 0021001 to 0022001
Color of Numbers RED
8. Perforating Specs. 1-VERTICAL, 5/8" FROM TOP OF FORM AT SNAP-OUT POINT

9. Ink specs. 1-SIDED PRINTING, BLACK INK, MARGINALS PRINT IN RED

10. Additional Requirements NEGATIVE WILL BE PROVIDED. BLUELINE PROOF
REQUIRED. MARGINALS PRINT IN RED, SHRINK WRAP IN SETS OF 100. INVOICE ,
PROOF AND SHIP DIRECTLY TO: DISTRICT COURT OF THE FIRST CIRCUIT, KANEO-
HE DIVISION, 45-939 POOKELA ST., KANEOHE, HI 96744. ATTN: SHIRLEY 534-6302.
RETURN 2 SAMPLES AND THE NEGATIVE TO THE REPRO-GRAPHICS CENTER.

BELOW FOR REPRO-GRAPHICS USE ONLY

COMPANY	QUOTE	DATE	COMPANY	QUOTE	DATE



BAIL/BOND RELEASE FORM AND NOTICE TO APPEAR

BRF No. *10* *0020999*

Arresting Agency:		State ID (SID)/Booking No. (if applicable):		Date:
Charge(s)/Statutory Section(s):	Arrest Report/Citation No(s):	Charge(s)/Statutory Section(s):	Arrest Report/Citation No(s):	
Release Based On: <input type="checkbox"/> ROR <input type="checkbox"/> CASH BAIL/CERTIFIED/CASHIER'S CHECK <input type="checkbox"/> PAPER BOND				
BAIL/BOND INFORMATION				
BAIL/BOND FOR (Defendant's Name): _____				
DOB: _____	SSN: _____	PHONE NO.: _____		
ADDRESS: _____				
AMOUNT RECEIVED: \$ _____				
CERTIFIED/CASHIER'S CHECK NO. OR POWER OF ATTORNEY NO: _____				
BAIL OR BOND POSTED BY (Received from): <input type="checkbox"/> Defendant <input type="checkbox"/> Third Party Surety <input type="checkbox"/> Licensed Surety Co./Agent				
COURT APPEARANCE INFORMATION				
YOU ARE TO APPEAR IN: <input type="checkbox"/> CIRCUIT <input type="checkbox"/> FAMILY <input type="checkbox"/> DISTRICT <input type="checkbox"/> COURT OF THE FIRST CIRCUIT				
Division (FOR DISTRICT COURT ONLY): <input type="checkbox"/> HONOLULU <input type="checkbox"/> EWA <input type="checkbox"/> KANE OHE <input type="checkbox"/> WAHIAWA <input type="checkbox"/> WAI'ANAE				
<input type="checkbox"/> OTHER (Specify): _____				
DATE AND TIME OF COURT APPEARANCE: _____ / _____ AM/PM (circle one)				
DEFENDANT'S ACKNOWLEDGMENT OF TERMS AND CONDITIONS FOR RELEASE ON BAIL				
In order to be admitted to bail and released from custody, I agree to comply with the terms and conditions of bail set forth herein, all conditions imposed by law, and any additional conditions that a court may later impose on me. I specifically understand and agree that:				
<ul style="list-style-type: none"> I must appear in person for all court hearings, including the hearing set forth above. If I fail to appear, my release will be revoked, a bench warrant will issue for my arrest, and I may be charged for bail jumping or contempt of court. I will remain in the State of Hawaii unless I obtain court approval to leave the jurisdiction. I will not commit a federal, state or local offense during the period of release. If I fail to comply with all terms and conditions of my release, any cash or bond posted for my release WILL BE FORFEITED to the State and NOT RETURNED. Any cash deposited as security for this bond may be applied to pay any fines, restitution, costs or fees that I may be ordered to pay in this case. This is a continuing bond, and if I am convicted, this bond will continue, unless otherwise ordered by the court, until final determination of my case, including appeal. 				
Date	Defendant's Signature		Printed Name of Defendant	
LAW ENFORCEMENT OFFICER/CLERK				
Please check one and complete appropriate form:				
<input type="checkbox"/> Cash was deposited BY DEFENDANT .				
<input type="checkbox"/> Bail/Bond deposited by THIRD PARTY SURETY (Form A, attached as page 2 - Executed by Third Party Surety)				
<input type="checkbox"/> Bail/Bond was posted by a LICENSED SURETY INSURANCE COMPANY/AGENT (Form B, attached as page 2 - Executed by Surety Agent; Agent's Power of Attorney also attached)				
Date	Officer/Clerk's Signature	Printed Name/ID No.	Agency	

NOT ACTUAL STUB! (BAR CODE)

1C-V-077